PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10809454

-		CLAIMS A	AS EII EF	DADT	1 .			<u>-</u>				
			(Colur			Column 2)		SMALL ENTITY TYPE		OR	OTHER TH.	
TOTAL CLAIMS			13	13				RATE	FEE	7	RATE	FEE
FOR			NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC FE	E 385.0	0 OR	BASIC FE	
Ţ	OTAL CHARGE	EABLE CLAIMS	15 minus 20= *					X\$ 9=	1	OR	X\$18=	1
INDEPENDENT CLAIMS			13 minus 3 = 1 /)		X43=	430	7	X86=	
М	ULTIPLE DEPE	ENDENT CLAIM I	RESENT						1420	OR	7,00-	
* If the difference in column 1 is less than zero, enter "0" in column 2								+145=		OR	+290=	
CLAIMS AS AMENDED - PART II								TOTAL	315	OR	TOTAL	<u> </u>
		(Column 1)	AMENDE	(Column 2)				SMALL	ENTITY	OR		R THAN ENTITY
4		CLAIMS REMAINING		HIGHE			7 [ADDI-	7		ADDI-
AMENDMENT		AFTER AMENDMENT		PREVIO	USLY	PRESENT EXTRA			TIONAI FEE	-	RATE	TIONAL
	Total	*	Minus	##		=		X\$ 9=		OR	X\$18=	1 5 5
AME	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		1	+290=	
	7						L			OR		
	,						А	TOTAL DDIT. FEE		OR A	TOTAL DDIT. FEE	
		(Column 1)		(Colum	n 2)	(Column 3)						
m		CLAIMS REMAINING		HIGHE NUMBE		22505117	Γ		ADDI-	7 [ADDI-
뒫		AFTER		PREVIOL	JSĽY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL
뿔		AMENDMENT		PAID FO	OR		-		FEE	1		FEE
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
δ	Independent	*	Minus	***		=		X43=		OR	X86=	
	ring) Phese	NTATION OF ML	ILTIPLE DE	PENDENT	LAIM		T	+145=		OR	+290=	
								TOTAL		{ L	TOTAL	•
								DDIT. FEE 🌡	•	OR A	DDIT. FEE	
7		(Column 1)		(Column		(Column 3)		•				·
AMENDMENIC		REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOUS PAID FO	R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= .		X\$ 9=			X\$18=	
ME.	Independent		Minus	***	- 1	=	┢			OR		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							X43=		OR	X86=	
* If 1	the entry in colum	nn 1 is less than the	00104				L	-145=		OR	+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***OPTION OF TOTAL ADDIT. FEE												
Th	ne "Highest Num	ber Previously Paid	For (Total or	o orace is le Independent)	is the h	ა, enter "3." ighest number f			opriate box			